

POLICY NUMBER: ASNNCF162086935-002

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

POLICY CHANGES

POLICY INFORMATION

This endorsement modifies insurance provided under the following:
BUSINESSOWNERS COVERAGE FORM

Effective Date of Change: 2022-08-08

Named Insured: Vintage Grove Homeowners Association, Inc.



Insured's Mailing Address



Additional Interest Parties

ADDITIONAL NOTES

Management Company Amended to: Grandchester Meadows

Mailing address has been amended to:

c/o Grandchester Meadows

PO Box 1149

Apex NC 27502

All other terms and conditions remain the same.

Countersigned By:



JOHN J. LUPICA, President

(Authorized Representative)

CHUBB®

Pacific Indemnity Company
202 Hall's Mill Rd.
Whitehouse Station, NJ 08889

Micro Package Policy Declarations

This Policy is issued by the stock insurance company listed above ("Insurer").

Policy

Number: ASNNCF162086935-002

Renewal of: ASNNCF162086935-002

Named Insured & Principal Address:

Vintage Grove Homeowners Association, Inc.
c/o Grandchester Meadows, PO Box 1149
Apex, NC 27502

Policy Period:

From: 08-03-2022 To: 08-03-2023
12:01 AM* Standard Time at your mailing
address shown
*Exceptions: 12:00 PM in Michigan and
North Carolina

TOTAL AMOUNT DUE : \$956.00

Admitted Status: Admitted

Auditable Status: No

Auditable Period: Annual

Additional Named Insureds:

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE
AGREE WITH YOU TO PROVIDE INSURANCE AS STATED IN THIS POLICY

Business Description: Community Associations

Item A.. PROPERTY

Covered Premises: 1000 Beringer Place , Apex, NC 27502-8933						
Prem. No	Coverage(s)	Limit	Deductible	Valuation	Cause of Loss	Premium
1	Buildings	\$75,000	\$500	Replacement Cost	Special	\$144
1	Contents	\$7,500	\$500	RC	Special	\$21

WIND COVERAGE

Wind Deductible Percentage

N/A

Wind Deductible Dollar Amount 500

Wind Excluded
No

Wind Premium: INCLUDED

Total Terrorism (TRIA) Premium: \$5

Total Property Premium: \$539.00

Item B **GENERAL LIABILITY**

Covered Premises: 1000 Beringer Place , Apex, NC 27502-8933

Prem . No	Classification	Class Code	Rating Basis	Premium Basis	Premium	
					Prem/Ops	PR/CO
1	Homeowners Association - No Mercantile Or Office	65132	UNITS	95	\$175	\$0
1	Swimming Pools - At Owned Property Or Business	59999	POOLS	1	\$121	\$0

LIMITS

General Aggregate	\$2,000,000
Products/Completed Operations Aggregate	\$2,000,000
Personal & Advertising Injury Limit	\$1,000,000
Each Occurrence Limit	\$1,000,000
Damage to Premises Rented to You	\$100,000
Medical Expense Limit	\$5,000

Total General Liability Premium \$417.00

Item C. **OPTIONAL COVERAGES**

CRIME AND FIDELITY

EMPLOYEE BENEFIT PLAN(S):

LIMITS

Employee Theft	Zero
Forgery or Alteration	\$2,500
Inside The Premises – Theft of Money and Securities	Zero
Inside The Premises – Robbery or Safe Burglary of Other Property	\$0
Outside the Premises	\$0
Computer and Funds Transfer Fraud	Zero
Money Orders and Counterfeit Money	\$1,000

Total Crime and Fidelity Premium: Not Included

EMPLOYEE DISHONESTY

LIMITS

Employee Dishonesty Limit	\$50,000
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Total Employee Dishonesty Premium: \$91

HIRED AND NON-OWNED AUTO

LIMITS

General Aggregate Limit	\$2,000,000
Each Occurrence Limit	\$1,000,000

Total Hired & Non-Owned Auto Premium: \$95.00

Outdoor Signs

LIMITS

Outdoor Signs Limit	\$1,000
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Total Outdoor Signs Premium: \$18

EQUIPMENT BREAKDOWN

LIMITS

Equipment Breakdown Protection Sub-Limit	
Equipment Breakdown Protection Deductible	\$500
Business Income Time Deductible	72

Total Equipment Breakdown Premium: \$57

FORGERY AND ALTERATION

LIMITS

Forgery and Alteration Limit	\$2,500
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Total Forgery and Alteration Premium: \$23

ASSOCIATION PROPERTY IN THE OPEN

LIMITS

Association Property In The Open Coverage Limit	202500
Association Property In The Open Coverage Description	

Total Association Property In The Open Coverage Premium: \$180

Total Terrorism (TRIA) Premium:	\$9
Total General Liability Premium:	\$417
Total Policy Premium:	\$956.00

Item E COVERAGE FORMS

Form Number	Edition	Title
MTEMultiCh	ange	Policy Changes
BOP48600	0117	Micro Package Policy Declarations

Item F Notice under this **Policy** shall be given to:
Chubb North American Claims
P.O. Box 5122
Scranton, PA 18505
ApolloOps1FNOL@chubb.com

Item G. Producer Name and Mailing Address

HOA BUSINESS ONLY MCGOWAN & COMPANY INC
10745 BIRMINGHAM WAY
WOODSTOCK, MD 21163

Item H. Producer Code: Z03930

IN WITNESS WHEREOF, the **Insurer** has caused this **Policy** to be signed by its President and Secretary,
and countersigned by a duly authorized representative of the **Insurer**.
DATE: 08-08-2022

Authorized Representative

Chubb. Insured.SM